

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

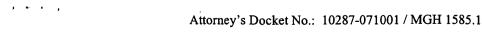


or <u>Fax</u> (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

maintenance fee notification			 			
CURRENT CORRESPONDENC	CE ADDRESS (Note: Legibly mark-up	with any corrections or u	se Block 1)	Note: A certificate of	f mailing can only be used for his certificate cannot be used	or domestic mailings of the
126161 7590 03/24/2004				papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
FISH & RICHAR		/	(4)			
225 FRANKLIN S		JUN 2 4 2	004 2 5)	I hereby certify that the	rtificate of Mailing or Trans his Fee(s) Transmittal is bein	g deposited with the United
BOSTON, MA 02		12	15 E	States Postal Service addressed to the Ma transmitted to the USI	his Fec(s) Transmittal is bein with sufficient postage for fir il Stop ISSUE FEE address PTO, on the date indicated bel	st class mail in an envelope above, or being facsimile ow.
		TRADE!	ALPIK		Megan Cr	(Depositor's name)
					no,	(Signature)
					6/2//	(Date)
APPLICATION NO.	FILING DATE	F	IRST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/813,640	9/813,640 03/21/2001 K		Kiichiro Yano	····	10287-071001/MGH	2899
TITLE OF INVENTION: M	ETHODS OF MODULATI	NG HAIR GROWT	н		1585.1	
			••			
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E PI	JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330		\$300	\$1630	06/24/2004
•					7.000	00/24/2004
EXAMINER		ART UNI	r c	LASS-SUBCLASS	j	
ANGELL, JON E		1635		435-006000		
1. Change of correspondenc CFR 1.363).	e address or indication of "F	ee Address" (37		the patent front page,		Richardson P.C
,	agents OR, alternatively, (2) the name of a single					
	ence address (or Change of C 22) attached.			member a registered mes of up to 2 regist		
☐ "Fee Address" indicati PTO/SB/47; Rev 03-02	on (or "Fee Address" Indicator more recent) attached. Use	tion form	attorneys or agents. If no name is listed, no name will be printed.			
Number is required.	,					
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT (print	or type)		
PLEASE NOTE: Unless been previously submitte	an assignce is identified be	low, no assignee dat	ta will appear on the	patent. Inclusion of a	ssignee data is only appropria	ite when an assignment has
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
The General Hospital Corporation Boston, MA						
Please check the appropriate	assignee category or catego	ries (will not be prir	ted on the patent);	individual 🕮	corporation or other private gr	oup entity government
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):						
☐ Rubblication Fee. ☐ A check in the amount of the fee(s) is enclosed. ☐ Rubblication Fee. ☐ Description Fe						
Republication Fee □ Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies						credit any overnayment to
				mber $06 = 1050$	(enclose an extra c	
Director for Patents is reque	sted to apply the Issue Fee a	nd Publication Fce (if any) or to re-apply	any previously paid i	ssue fee to the application ide	ntified above.
(Authorized Signature)	· · · · · · · · · · · · · · · · · · ·	(Date)	1	Ī		
	\sim	211	, 04			
NOTE; The Issue Fee and other than the applicant; interest as shown by the re	d Publication Fee (if require a registered attorney or ag- cords of the United States Pa	ed) will not be account; or the assigned tent and Trademark	epted from anyone or other party in Office.	nyone rty in 06/25/2004 SMINASS2 00000053 061050 09813640		
This collection of information is required by 37 CFR 1.311. The information is require obtain or retain a benefit by the public which is to file (and by the USPTO to process application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection				01 FC:1501	1330.00 DA 300.00 DA	
application. Confidentiality	22 and 37 CFR 1.14	This collection is	02 FC:1504 03 FC:8001	30.00 DA		
completed application for	y is governed by 35 U.S.C. I test to complete, including g m to the USPTO. Time wi the amount of time you this burden, should be sent Office, U.S. Department EEND FEES OR COMPLE for Patents, Alexandria, Virginia (1988).	ll vary depending u	pon the individual			
suggestions for reducing t	this burden, should be sent	to the Chief Inform	ation Officer, U.S.			
22313-1450. DO NOT S	SEND FEES OR COMPLE	TED FORMS TO	THIS ADDRESS.			
SEND IO: Commissioner	for Patents, Alexandria, Vir	ginia 22313-1450.				

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Michael Detmar et al.

Art Unit

1635

Serial No.:

09/813,640

Examiner:

Angell, Jon E.

Filed

: March 21, 2001

Confirmation No.:

2899

Title

Notice of Allowance Date: March 24, 2004 : METHODS OF MODULATING HAIR GROWTH

MAIL STOP ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

RESPONSE TO NOTICE OF ALLOWANCE

In response to the Notice of Allowance mailed March 24, 2004, enclosed is a completed issue fee transmittal form PTOL-85b. Please charge Deposit Account No. 06-1050 in the amount of \$1660 for the required issue fee (\$1330) and publication fee (\$300), including patent copies (\$30).

Please apply any additional charges or credits to our Deposit Account No. 06-1050.

Respectfully submitted,

Date:

Jue 04

Louis Myers

Reg. No. 35,965

Fish & Richardson P.C. 225 Franklin Street Boston, MA 02110-2804

Telephone: (617) 542-5070 Facsimile: (617) 542-8906

20853817.doc

CERTIFICATE OF MAILING BY FIRST CLASS MAIL

I hereby certify under 37 CFR §1.8(a) that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage on the date indicated below and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date of Deposit

Signature